FORM D

U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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FORM D

PURSUANT TO REGULATION

UNIFORM LIMITED OFFERING EXEMPTION

SECTION 4(6), AND/OR

NOTICE OF SALE OF SECURITIES 1 2 2004

OMB APPROVAL

OMB NUMBER: 3235-0076

Expires: May 31,2005 Estimated average burden hours per response . . 16.00

RECEIVEL

SEC USE ONLY

DATE RECEIVED

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Prefix

04007662

Name of Offering (check if this is an amendment and name has changed, and indicate change.) WIMBLEDON MARATHON FUND, L.P. Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) WIMBLEDON MARATHON FUND, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 264 Riverside Avenue, Westport, CT 06880 (203) 227-5533 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (if different from Executive Offices) (Including Area Code) Brief Description of Business Securities Investment Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Month Year Actual Estimated Actual or Estimated Date of Incorporation or Organization: [1|1] [0|3]Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: [D][E] CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: <u>Five (5) copies</u> of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: ٥ Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner Executive Officer ☐ Director 🔀 General Partner Promoter Full Name (Last name first, if individual) Weston Capital Management, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 264 Riverside Avenue, Westport, CT 06880 General and/or Executive Officer Check Box(es) that Apply: Beneficial Owner Director Promoter Managing Partner Full Name (Last name first, if individual) Hallac, Albert Business or Residence Address (Number and Street, City, State, Zip Code) Weston Capital Management, LLC, 264 Riverside Avenue, Westport, CT 06880 Check Box(es) that Apply: Executive Officer ☐ Director General Promoter Beneficial Owner Full Name (Last name first, if individual) Rudnick, Errol Business or Residence Address (Number and Street, City, State, Zip Code) Weston Capital Management, LLC, 264 Riverside Avenue, Westport, CT 06880 Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Leopold, Kristen M. Business or Residence Address (Number and Street, City, State, Zip Code) Weston Capital Management, LLC, 264 Riverside Avenue, Westport, CT 06880 Executive Officer Check Box(es) that Apply: ___ Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Kelley, Christopher Business or Residence Address (Number and Street, City, State, Zip Code)

Principal

Managing Director

General and/or
Managing Partner

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Weston Capital Management, LLC, 264 Riverside Avenue, Westport, CT 06880

Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Weston Capital Management, LLC, 264 Riverside Avenue, Westport, CT 06880

Beneficial Owner

					B. II	NFORM.	ATION	ABOUT	OFFER	UNG				
1.	Has the i	ssuer sold	, or does the	e issuer inte	end to sell, t	o non-accre	dited inves	tors in this	offering?					Yes No
					Answe	r also in Ap	pendix, Co	lumn 2, if f	iling under	ULOE.				
2.	What is t	he minim	ım investm	ent that wil	l be accepte	ed from any	individual'	?		•••••			•••••	\$ <u>250,000</u>
2										Yes No				
3.	Does the offering permit joint ownership of a single unit?													
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Full Nam			individual)	aici, you iii	ay set forth	the informa	ition for the	it bloker of	dealer only	·				Tronc
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Business	or Residen	ce Addres	s (Number	and Street,	City, State,	Zip Code)					· · · · · ·			
Name of	 Associated	Broker or	Dealer				····			· · · · · · · · · · · · · · · · · · ·				
	13330(4100	Dione: of	Dealer											
States in	Which Pers	son Listed	Has Solicit	ed or Inten	ds to Solicit	Purchasers	i							
(Check '			individual									rrrr		All States
	[AL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam	e (Last nar	ne first, if	indiviđual)											
Business	or Residen	ce Addres	s (Number :	and Street,	City, State,	Zip Code)				·			·	
			·			•								
Name of .	Associated	Broker or	Dealer						··· -					
States in '	Which Pers	son Listed	Has Solicit	ed or Inten	ds to Solicit	Purchasers						· · · · ·		
(Check 5	All States	" or check	individual	States)										All States
CHECK	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
Full Nam	[R]] e (Last nar	[SC] ne first, if	[SD] individual)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Business	or Residen	ce Addres	s (Number	and Street,	City, State,	Zip Code)					- · · · · · · · · · · · · · · · · · · ·			
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ivanie oi .	nssuciated	DIOKET OF	Dealer											
States in '	Which Pers	son Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers			<u> </u>			**	··········	
(Check '	'All States'	" or check	individual	States)		• • • • • • • • • • • • • • • • • • • •								All States
	[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	(FL) [MI] [OH]	[GA] [MN] [OK]	(HI] [MS] [OR]	[ID] [MO] [PA]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEED	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of		
	the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	S
	Equity	\$ \$	\$
	☐ Common ☐ Preferred	J	<u> </u>
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests.	\$	\$
	Limited Partnership Interests*	\$ 250,000,000	\$ 1,500,000
	Total*	\$_250,000,000	\$ 1,500,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregata
	is none or zero.	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	\$ 1,500,000
	Non-accredited Investors	N/A	\$ N/A
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Tama of official	Type of	Dollar Amount
	Type of offering Rule 505	Security	Sold \$
	Regulation A		
	Rule 504	-	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of		\$
٦.	the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ 0
	Printing and Engraving Costs		\$
	Legal Fees		\$ 20,000
	Accounting Fees		\$ 0
	Engineering Fees		\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify) Miscellaneous (blue, sky fees, duplicating, courier, etc.)		\$ 5,000
	Total		\$ 25,000

^{*} This is a continuous offering. Therefore, the aggregate offering price could be greater than or less than this amount.

C. OFFEI	RING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND USE O	F PROCEEDS		
b. Enter the different Question 1 and total is the "adjusted gross 5. Indicate below the arbe used for each of the an estimate and check the street of the s	ce between the aggregate expenses furnished in response proceeds to the issuer." In count of the adjusted grosphe purposes shown. If the kethe box to the left of the red gross proceeds to the interest of the second proceeds to the second proceeds the second proceeds to the second proceed proceeds to the second proceeds to the secon		*\$ <u>249,975,000</u>		
Purchase of real estar Purchase, rental or le Construction or leasi Acquisition of other that may be used in e merger)	asing and installation of rang of plant buildings and businesses (including the xchange for the assets or edness	nachinery and equipment	Payments to Officers, Directors, & Affiliates \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Payments To Others S	
Total Payments Liste	d (column totals added)		⋈ \$ <u>249,975,000</u>		
]	D. FEDERAL SIGNATURE			
following signature constitute request of its staff, the inform	es an undertaking by the	the undersigned duly authorized person. If this issuer to furnish to the U.S. Securities and Eart to any non-accredited investor pursuant to pa	Exchange Commi	ssion, upon written	
Issuer (Print or Type)		Signature to M. Legold	Date	10/01/	
WIMBLEDON MARATHON Name of Signer (Print or Type)	FUND, L.P.	Title of Signer (Print or Type)		10(04	
		- ' '			
Kristen M. Leopold		Chief Financial Officer of Weston Capital Mar	nagement LLC, G	eneral Partner	

* See asterisked comment on p.4.

ATTENTION